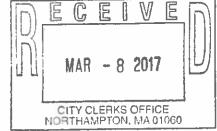


Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

sachusett	s		File with City or Town Clerk or Ele	
Fill in Rep	orting Period dates Beginning Date 1-1-3	voile	Ending Date 12-31 - 20	116
	eport: (Check one) preceding preliminary	day ai	iter electron	dissolution
12	Candidate Full Name (if applicable) Lucy Company Continue Sought and District Continue Sought and District Residential Address Tel	L C	Committee Manie COMMITTEE TO ELECT ELF Committee Name Committee Treasurer Committee Mailing Address Number (optional) 413-219-77	MA 1 01060
ſ	SUMMARY BALANCE I	1FOR	RMATION:	!
	Line 1: Ending Balance from previous report		331,91	
	Line 2: Total receipts this period (page 3, line 11)		00.00	
	Line 3: Subtotal (line 1 plus line 2)		331, 91	
ā	Line 4: Total expenditures this period (page 5, line 14)		00.00	
	Line 5: Ending Balance (line 3 minus line 4)		331.91	
	Line 6: Total in-kind contributions this period (page 6)		00.00	
	Line 7: Total (all) outstanding liabilities (page 7)		00,00	
	Line 8: Name of bank(s) used: Florence	<u>S</u>	SHINGS BANK	
FOR CA Candid I certif activity, incl reactivity incurre Candi I certif finance campa	Committee Treasurer: It have examined this report including mached schedules and it is, to the best of m luding all contributions, loans, receipts, expenditures, disbursements, in-kind contribution of all persons acting under the authority or on behalf of this committee in accordance the penalties of perjury: NDIDATE FILINGS ONLY: Affidavit of Candidate: (check I box on date with Committee and no activity independent of the committee by that I have examined this report including attached schedules and it is, to the best, of all persons acting under the authority or on behalf during this reporting per data without Committee on accordance without Committee on accordance without Committee on the candidate with independent activity filing separity that I have examined this report including attached schedules and it is, to the best of the cartivity, including contributions, loans, receipts, expenditures, disbursements, in sign finance activity of all persons acting under the authority of on behalf of this condet the penalties of perjury:	t of my klance withind.	knowledge and belief, a true and complete statement of the the requirements of M.G.L. c. 55. I have not received knowledge and belief, a true and complete statement of the requirements of M.G.L. c. 55. I have not received knowledge and belief, a true and complete statement of the knowledge and belief, a true and complete statement of the knowledge and belief, a true and complete statement of the knowledge and liabilities for this reporting period and the in accordance with the requirements of M.G.L. c. 55.	f all campaign finance and any contributions,
) Confide M. New			
			D) E G E I	



SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar rear Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to eport all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address	a page number	
Date Received	(alphabetical listing required)	Amour	Occupation & Employer nt (for contributions of \$200 or more)
			(101 Counting of \$200 or more)
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			1
			##
		4	
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_			
		<u> </u>	
			NI 1
9: Total Receipts	over \$50 (or listed above)		
10: Total Receipts	\$50 and under* (not listed above)		
	EIPTS IN THE PERIOD		
at have itemized	EIL 13 LY THE PERIOD	0.00	← Enter on page 1, line 2
mayo recinized tece	ipis of \$50 and under, include them in line	9. Line 10 should	Enter on page 1, line 2 d include only those receipts not itemized above.
			Deer a de remisen anove.

Page 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	27 -		
			·
ine 9: Total Receipts	over \$50 (or listed above)		
ine 10: Total Receipt	s \$50 and under* (not listed above)		
ine 11: TOTAL RE	CEIPTS IN THE PERIOD	600 +	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep 'etailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, rom committee records, and reported on line 13.

A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

eport all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid					
Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above) Line 13: Total Expenditures \$50 and under* (not listed above)	Date Paid		Address	Purpose of Expenditure	Amount	
Line 13: Total Expenditures \$50 and under* (not listed above) Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD						
Line 13: Total Expenditures \$50 and under* (not listed above) Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD			-			
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Line 13: Total Expenditures \$50 and under* (not listed above) Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD			Line 12: Total Expenditures over	er \$50 (or listed above)		
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD						
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD			Line 13: Total Expenditures \$50	and under* (not listed above)		
Direct on page 1, time 4 -> DIRECTAL EXPENDITURES IN THE PERIOD () : () ()		(9)			2 60	
		Lines on page 1, title 4	EME 14. TOTAL EXPENDIT	RES IN THE PERIOD	0:00	

If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized pove.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amoun
				<u> </u>
8				
				<u> </u>
	9			
		Line 12: Expenditures over \$50 ((or listed above)	
		Line 13: Expenditures \$50 and ur	nder* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITU	RES IN THE PEDIOD	0.00

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

'lease itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be dded together from the committee's records and included in line 16 on page 1.

ate Received	From Whom Received*	Residential Address	Description of Contribution	Value
				**;

	A			
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
	± 7	Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	0.00

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

*M. G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period

Incurred	To Whom Due	Address	Purpose	Amount
				7.00
	Enter on page 1, line $7 \rightarrow$	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	0,00 Page

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